

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/532808
APPLICANT(S)

FILING DATE

4-28-05

CLAIMS

4-28-05

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/	/	/		
3		/		/		
4		/		/		
5		/		/		
6		/		/		
7		/		/		
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47		/		/		
48	/			/		
49		/		/		
50		/		/		
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/		/		
52		/		/		
53		/		/		
54		/		/		
55		/		/		
56		/		/		
57		/		/		
58		/		/		
59		/		/		
60		/		/		
61	2		2			
62	2		2			
63	2		2			
64	2		2			
65	2		2			
66	2		2			
67	2		2			
68	2		2			
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	88	←	66	←		←
TOTAL CLAIMS	90		68			